



|  |                 |                 |
|--|-----------------|-----------------|
| <b>INFORMATION DISCLOSURE CITATION<br/>IN AN APPLICATION</b><br><small>(Use several sheets if necessary)</small> | Atty Docket No. | Application No. |
|  | 112740-936      | 10/777,880      |
|  | Applicant       | Madsen          |
|  | Filing Date     | Group           |
| 2-11-04  | 2681            |                 |

## **U.S. PATENT DOCUMENTS**

## **FOREIGN PATENT DOCUMENTS**

**OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)**

| Examiner's<br>Initials | OTHER DOCUMENTS (including Author, Title, Date, Factual Page, Etc.) |
|------------------------|---|
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |
|                        |   |

|           |   |                  |         |
|-----------|---|------------------|---------|
| Examiner: | <u>H. C. Smith/Kimberly A. Johnson</u> 62 | Date Considered: | 3/20/06 |
|-----------|---|------------------|---------|